

**UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF RHODE ISLAND**

STATE OF NEW YORK, *et al.*,

Plaintiffs,

v.

U.S DEPARTMENT OF JUSTICE, *et al.*

Defendants.

**DECLARATION OF ODESSA CROCKER,
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION,
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**

I, Odessa Crocker, make the following declaration under 28 U.S.C. § 1746:

1. I am the Acting Director of the Office of Financial Resources at the Substance Abuse and Mental Health Services Administration (SAMHSA), a component of the U.S. Department of Health and Human Services (HHS).

2. In this role, I am responsible for fiscal stewardship across SAMHSA and serve as the agency's principal advisor and liaison on all aspects of budget, grants, contracts, and financial management activities. In this role I have oversight of the Division of Grants Management (DGM) which serves as SAMHSA's central office for the management, leadership, and administration of grants and cooperative agreements, ensuring all grant awards conform to applicable statutory, regulatory, and administrative policy requirements, from the pre-award stage through closeout.

3. Through this work, I am familiar with SAMHSA's Substance Use Prevention, Treatment, and Recovery Services Block Grants; Community Mental Health Services Block Grants; Projects for Assistance in Transition from Homelessness Grant Programs; Certified Community Behavioral Health Clinics; and many Mental Health and Substance Use Disorder

Treatment, Prevention, and Recovery Support Services Programs—five of the newly-added programs under the HHS Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) Notice, issued on July 14, 2025. 90 Fed. Reg. 31232.

4. I submit this declaration in support of the Defendants’ Opposition to Plaintiffs’ Motion for Preliminary Injunction in the above-captioned matter. Specifically, I submit this declaration to describe (i) the Federal public benefit provided by the five aforementioned newly-added PRWORA programs administered by SAMHSA; (ii) the general purpose of HHS’s PRWORA Notice; and (iii) SAMHSA’s plans with respect to the issuance of program-specific guidance implementing the HHS PRWORA Notice.

5. This declaration is based on my personal knowledge, information acquired in the course of performing my official duties, information conveyed to me by current agency employees, and information contained in agency records to which I have access in the normal course of my duties.

6. In terms of Federal public benefits, the Substance Use Prevention, Treatment, and Recovery Services Block Grants provide formula grants to states for carrying out activities to prevent, treat, and provide recovery support services for substance use disorders. 42 U.S.C. §§ 300x-21 – 300x-35, 42 U.S.C. §§ 300x-51 – 300x-66.

7. The Community Mental Health Services Block Grants provide formula grants to states for providing community mental health services for adults with a serious mental illness and children with a serious emotional disturbance. 42 U.S.C. §§ 300x-1 – 300x-9, 42 U.S.C. §§ 300x-51 – 300x-66.

8. The Projects for Assistance in Transition from Homelessness Grant Program provides formula grants to states as pass-through entities for funding to political subdivisions and

nonprofit private entities for providing an array of services to individuals who are suffering from serious mental illness or from co-occurring serious mental illness and substance use disorder and who are homeless or at imminent risk of becoming homeless. Funded services include behavioral health services, including outreach, screening and diagnostic treatment services; community mental health services; alcohol or drug treatment services; habilitation and rehabilitation services; case management services; supportive and supervisory services in residential settings; and referrals for primary health services, job training, educational services, and relevant housing services. 42 U.S.C. §§ 290cc-21 – 35.

9. SAMHSA Certified Community Behavioral Health Clinic Expansion grants provide comprehensive, integrated, coordinated, and person-centered behavioral health care, including 24-hour crisis mental health services; screening, assessment, and diagnostic services; patient-centered treatment planning; outpatient mental health and substance use services; targeted case management; psychiatric rehabilitation services; and peer support and counselor services. 42 U.S.C. § 290bb-32.

10. The Mental Health and Substance Use Disorder Treatment, Prevention, and Recovery Support Services Programs encompass a wide array of SAMHSA-administered programs, most of which are carried out under three discretionary program authorities: the Priority Mental Health Needs of Regional and National Significance, 42 U.S.C. § 290bb-32; Priority Substance Use Disorder Treatment Needs of Regional and National Significance, 42 U.S.C. § 290bb-2; and Priority Substance Use Disorder Prevention Needs of Regional and National Significance, 42 U.S.C. § 290bb-22. These discretionary programs address mental health, substance use disorder treatment, and substance use disorder prevention needs through knowledge development and application projects, training and technical assistance programs, and targeted

capacity response programs. Funding is awarded under grants, contracts, or cooperative agreements with states; political subdivisions of states; Indian Tribes or Tribal organizations; or health facilities or programs operated by or in accordance with a contract or grant with the Indian Health Service, or other public or private nonprofit entities.

11. Under most programs, the agency has a range of enforcement methods to address noncompliance with terms and conditions of a grant award. The block grant authorities permit SAMHSA to suspend or withhold payment, require repayment, offset the award, terminate the grant, or employ any other legally available and appropriate remedy. 42 U.S.C. § 300x-55. Under most discretionary grants, the agency may impose additional conditions, temporarily withhold payments, disallow costs, suspend or terminate the award, or take any other legally available enforcement action. 45 C.F.R. § 75.371. Under 45 C.F.R. §§ 75.207 and 371, and in accordance with the HHS Grants Policy Statement, the agency will generally afford grant recipients an opportunity to correct deficiencies before taking enforcement action, including, as appropriate, providing referrals to obtain technical assistance and requiring additional prior approval and project monitoring through establishing Corrective Action Plans.

12. To the best of my knowledge, the purpose of the HHS PRWORA Notice issued on July 14, 2025 was to provide notice and clarity regarding HHS's interpretation and application of PRWORA, to identify HHS programs that provide "Federal public benefits within the scope of PRWORA," to seek public comment, and to forecast potential forthcoming program-specific guidance implementing the HHS PRWORA Notice, as needed.

13. Presently, SAMHSA is deliberating regarding whether program-specific guidance for the programs administered by SAMHSA is needed in light of the HHS PRWORA Notice.

Executed this 11th day of August 2025, in Washington, D.C.

Odessa Crocker